

3731/8
+

PTO/SB/21 (modified)
Approved for use through xx/xx/xx, OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>	U.S. Department of Commerce Patent and Trademark Office	Application Number	09/413,012
		Filing Date	October 5, 1999
		First Named Inventor	Albert K. Chin
		Group Art Unit Number	3731
		Examiner Name	Victor X. Nguyen
Total Number of Pages in This Submission	25	Attorney Docket Number	4496

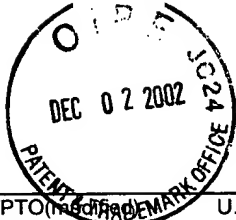
ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input checked="" type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input checked="" type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) []
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Information Disclosure Statement & PTO-1449 <input type="checkbox"/> Copies of IDS Cited References	<input type="checkbox"/>
<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/>
<input type="checkbox"/> Request for Correction of Recorded Assignment	<input type="checkbox"/>
<input checked="" type="checkbox"/> Amendment/Response: 22 Page(s) <input type="checkbox"/> After Final	<input type="checkbox"/>
<input type="checkbox"/> Status Request	<input type="checkbox"/>
<input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/>

REMARKS:

SIGNATURE OF ATTORNEY OR AGENT	
Signature:	<i>Albert C. Smith</i>
Attorney/Reg. No.:	Albert C. Smith, Reg. No. 20,355
Dated:	11/26/02

CERTIFICATE OF MAILING	
I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.	
Signature:	<i>Albert C. Smith</i>
Typed or Printed Name:	Albert C. Smith
Dated:	11/26/02
Express Mail Mailing Number (optional):	

RECEIVED
DEC - 6 2002
TECHNOLOGY CENTER R3700



Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0002/PTO (modified) Rev. 10/2001	U.S. Department of Commerce Patent and Trademark Office	Complete if Known	
		Application Number	09/413,012
		Filing Date	October 5, 1999
		First Named Inventor	Albert K. Chin
		Group Art Unit	3731
		Examiner Name	Victor X. Nguyen
Attorney Docket Number		4496	

FEE TRANSMITTAL**TOTAL AMOUNT OF PAYMENT**Subtotal (1) + Subtotal (2) + Subtotal (3) = **(\$ 774)**

METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																									
1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge the indicated fees to the below mentioned deposit account. <input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account. [†] <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27 Deposit Account Number: 19-2555 Deposit Account Name: FENWICK & WEST LLP A Duplicate Copy of this authorization is attached 2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other		3. ADDITIONAL FEES <table border="1"><thead><tr><th>Large Entity Fee Code/Fee</th><th>Small Entity Fee Code/Fee</th><th>Fee Description</th><th>Fee Due</th></tr></thead><tbody><tr><td>1051/\$130</td><td>2051/\$65</td><td>Surcharge - late filing fee or oath</td><td><input type="checkbox"/></td></tr><tr><td>1052/\$50</td><td>2052/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td><input type="checkbox"/></td></tr><tr><td>1812/\$2,520</td><td>1812/\$2,520</td><td>For filing a request for reexamination</td><td><input type="checkbox"/></td></tr><tr><td>1251/\$110</td><td>2251/\$55</td><td>Extension for response within first month[†]</td><td><input type="checkbox"/></td></tr><tr><td>1252/\$400</td><td>2252/\$200</td><td>Extension for response within second month[†]</td><td><input type="checkbox"/></td></tr><tr><td>1253/\$920</td><td>2253/\$460</td><td>Extension for response within third month[†]</td><td><input type="checkbox"/></td></tr><tr><td>1254/\$1,440</td><td>2254/\$720</td><td>Extension for response within fourth month[†]</td><td><input type="checkbox"/></td></tr><tr><td>1255/\$1,960</td><td>2255/\$980</td><td>Extension for response within fifth month[†]</td><td><input type="checkbox"/></td></tr><tr><td>1401/\$320</td><td>2401/\$160</td><td>Notice of Appeal</td><td><input type="checkbox"/></td></tr><tr><td>1453/\$1,280</td><td>2453/\$640</td><td>Petition to revive unintentionally abandoned application</td><td><input type="checkbox"/></td></tr><tr><td>1501/\$1,280</td><td>2501/\$640</td><td>Utility Issue Fee (Or Reissue)</td><td><input type="checkbox"/></td></tr><tr><td>1502/\$460</td><td>2502/\$230</td><td>Design Issue Fee</td><td><input type="checkbox"/></td></tr><tr><td>1460/\$130</td><td>1460/\$130</td><td>Petitions to the Commissioner</td><td><input type="checkbox"/></td></tr><tr><td>1806/\$180</td><td>1806/\$180</td><td>Submission of Information Disclosure Statement</td><td><input type="checkbox"/></td></tr><tr><td>1801/\$740</td><td>2801/\$370</td><td>Request for Continued Examination (RCE)</td><td><input type="checkbox"/></td></tr><tr><td>8021/\$40</td><td>8021/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td><input type="checkbox"/></td></tr><tr><td>1809/\$740</td><td>2809/\$370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td><input type="checkbox"/></td></tr><tr><td>1810/\$740</td><td>2810/\$370</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td><input type="checkbox"/></td></tr><tr><td colspan="2">Other fee (specify):</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td colspan="2">Other fee (specify):</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td colspan="2">SUBTOTAL (3)</td><td>(\$) .00</td><td></td></tr></tbody></table>		Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due	1051/\$130	2051/\$65	Surcharge - late filing fee or oath	<input type="checkbox"/>	1052/\$50	2052/\$25	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>	1812/\$2,520	1812/\$2,520	For filing a request for reexamination	<input type="checkbox"/>	1251/\$110	2251/\$55	Extension for response within first month [†]	<input type="checkbox"/>	1252/\$400	2252/\$200	Extension for response within second month [†]	<input type="checkbox"/>	1253/\$920	2253/\$460	Extension for response within third month [†]	<input type="checkbox"/>	1254/\$1,440	2254/\$720	Extension for response within fourth month [†]	<input type="checkbox"/>	1255/\$1,960	2255/\$980	Extension for response within fifth month [†]	<input type="checkbox"/>	1401/\$320	2401/\$160	Notice of Appeal	<input type="checkbox"/>	1453/\$1,280	2453/\$640	Petition to revive unintentionally abandoned application	<input type="checkbox"/>	1501/\$1,280	2501/\$640	Utility Issue Fee (Or Reissue)	<input type="checkbox"/>	1502/\$460	2502/\$230	Design Issue Fee	<input type="checkbox"/>	1460/\$130	1460/\$130	Petitions to the Commissioner	<input type="checkbox"/>	1806/\$180	1806/\$180	Submission of Information Disclosure Statement	<input type="checkbox"/>	1801/\$740	2801/\$370	Request for Continued Examination (RCE)	<input type="checkbox"/>	8021/\$40	8021/\$40	Recording each patent assignment per property (times number of properties)	<input type="checkbox"/>	1809/\$740	2809/\$370	Filing a submission after final rejection (37 CFR 1.129(a))	<input type="checkbox"/>	1810/\$740	2810/\$370	For each additional invention to be examined (37 CFR 1.129(b))	<input type="checkbox"/>	Other fee (specify):		<input type="checkbox"/>	<input type="checkbox"/>	Other fee (specify):		<input type="checkbox"/>	<input type="checkbox"/>	SUBTOTAL (3)		(\$) .00	
Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due																																																																																								
1051/\$130	2051/\$65	Surcharge - late filing fee or oath	<input type="checkbox"/>																																																																																								
1052/\$50	2052/\$25	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>																																																																																								
1812/\$2,520	1812/\$2,520	For filing a request for reexamination	<input type="checkbox"/>																																																																																								
1251/\$110	2251/\$55	Extension for response within first month [†]	<input type="checkbox"/>																																																																																								
1252/\$400	2252/\$200	Extension for response within second month [†]	<input type="checkbox"/>																																																																																								
1253/\$920	2253/\$460	Extension for response within third month [†]	<input type="checkbox"/>																																																																																								
1254/\$1,440	2254/\$720	Extension for response within fourth month [†]	<input type="checkbox"/>																																																																																								
1255/\$1,960	2255/\$980	Extension for response within fifth month [†]	<input type="checkbox"/>																																																																																								
1401/\$320	2401/\$160	Notice of Appeal	<input type="checkbox"/>																																																																																								
1453/\$1,280	2453/\$640	Petition to revive unintentionally abandoned application	<input type="checkbox"/>																																																																																								
1501/\$1,280	2501/\$640	Utility Issue Fee (Or Reissue)	<input type="checkbox"/>																																																																																								
1502/\$460	2502/\$230	Design Issue Fee	<input type="checkbox"/>																																																																																								
1460/\$130	1460/\$130	Petitions to the Commissioner	<input type="checkbox"/>																																																																																								
1806/\$180	1806/\$180	Submission of Information Disclosure Statement	<input type="checkbox"/>																																																																																								
1801/\$740	2801/\$370	Request for Continued Examination (RCE)	<input type="checkbox"/>																																																																																								
8021/\$40	8021/\$40	Recording each patent assignment per property (times number of properties)	<input type="checkbox"/>																																																																																								
1809/\$740	2809/\$370	Filing a submission after final rejection (37 CFR 1.129(a))	<input type="checkbox"/>																																																																																								
1810/\$740	2810/\$370	For each additional invention to be examined (37 CFR 1.129(b))	<input type="checkbox"/>																																																																																								
Other fee (specify):		<input type="checkbox"/>	<input type="checkbox"/>																																																																																								
Other fee (specify):		<input type="checkbox"/>	<input type="checkbox"/>																																																																																								
SUBTOTAL (3)		(\$) .00																																																																																									
1. FILING FEE <table border="1"><thead><tr><th>Large Entity Fee Code/Fee</th><th>Small Entity Fee Code/Fee</th><th>Fee Description</th><th>Fee Due</th></tr></thead><tbody><tr><td>1001/\$740</td><td>2001/\$370</td><td>Utility Filing</td><td><input type="checkbox"/></td></tr><tr><td>1002/\$330</td><td>2002/\$165</td><td>Design Filing</td><td><input type="checkbox"/></td></tr><tr><td>1004/\$740</td><td>2004/\$370</td><td>Reissue</td><td><input type="checkbox"/></td></tr><tr><td>1005/\$160</td><td>2005/\$80</td><td>Provisional Filing</td><td><input type="checkbox"/></td></tr><tr><td colspan="2">SUBTOTAL (1)</td><td>(\$) .00</td><td></td></tr></tbody></table>		Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due	1001/\$740	2001/\$370	Utility Filing	<input type="checkbox"/>	1002/\$330	2002/\$165	Design Filing	<input type="checkbox"/>	1004/\$740	2004/\$370	Reissue	<input type="checkbox"/>	1005/\$160	2005/\$80	Provisional Filing	<input type="checkbox"/>	SUBTOTAL (1)		(\$) .00																																																																			
Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due																																																																																								
1001/\$740	2001/\$370	Utility Filing	<input type="checkbox"/>																																																																																								
1002/\$330	2002/\$165	Design Filing	<input type="checkbox"/>																																																																																								
1004/\$740	2004/\$370	Reissue	<input type="checkbox"/>																																																																																								
1005/\$160	2005/\$80	Provisional Filing	<input type="checkbox"/>																																																																																								
SUBTOTAL (1)		(\$) .00																																																																																									
2. CLAIMS <table border="1"><thead><tr><th>Large Entity Fee Code/Fee</th><th>Small Entity Fee Code/Fee</th><th>Fee Description</th></tr></thead><tbody><tr><td>1202/\$18</td><td>2202/\$9</td><td>Claims in excess of 20</td></tr><tr><td>1201/\$84</td><td>2201/\$42</td><td>Independent claims in excess of 3</td></tr><tr><td>1203/\$280</td><td>2202/\$140</td><td>Multiple dependent claim</td></tr><tr><td>1204/\$84</td><td>2204/\$42</td><td>Reissue independent claims over original patent</td></tr><tr><td>1205/\$18</td><td>2205/\$9</td><td>Reissue claims in excess of 20 and over original patent</td></tr></tbody></table>		Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	1202/\$18	2202/\$9	Claims in excess of 20	1201/\$84	2201/\$42	Independent claims in excess of 3	1203/\$280	2202/\$140	Multiple dependent claim	1204/\$84	2204/\$42	Reissue independent claims over original patent	1205/\$18	2205/\$9	Reissue claims in excess of 20 and over original patent																																																																								
Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description																																																																																									
1202/\$18	2202/\$9	Claims in excess of 20																																																																																									
1201/\$84	2201/\$42	Independent claims in excess of 3																																																																																									
1203/\$280	2202/\$140	Multiple dependent claim																																																																																									
1204/\$84	2204/\$42	Reissue independent claims over original patent																																																																																									
1205/\$18	2205/\$9	Reissue claims in excess of 20 and over original patent																																																																																									
		<table border="1"><thead><tr><th colspan="2">(Col. 1)</th><th colspan="2">(Col. 2)</th><th colspan="2">(Col. 3)</th><th colspan="2"></th><th colspan="2"></th></tr><tr><th>For</th><th>No. of Existing Claims</th><th colspan="2">Highest No. Previously Paid For</th><th></th><th>Extra**</th><th>Fee</th><th></th><th>Fee Due</th><th></th></tr></thead><tbody><tr><td>TOTAL</td><td>33</td><td>minus*</td><td>20 or 12</td><td>=</td><td>1</td><td>x 18</td><td>=</td><td>18</td><td></td></tr><tr><td>INDEP</td><td>17</td><td>minus*</td><td>3 or 5</td><td>=</td><td>9</td><td>x 84</td><td>=</td><td>756</td><td></td></tr><tr><td colspan="10">[] First presentation of multiple dependent claim</td></tr></tbody></table>		(Col. 1)		(Col. 2)		(Col. 3)						For	No. of Existing Claims	Highest No. Previously Paid For			Extra**	Fee		Fee Due		TOTAL	33	minus*	20 or 12	=	1	x 18	=	18		INDEP	17	minus*	3 or 5	=	9	x 84	=	756		[] First presentation of multiple dependent claim																																															
(Col. 1)		(Col. 2)		(Col. 3)																																																																																							
For	No. of Existing Claims	Highest No. Previously Paid For			Extra**	Fee		Fee Due																																																																																			
TOTAL	33	minus*	20 or 12	=	1	x 18	=	18																																																																																			
INDEP	17	minus*	3 or 5	=	9	x 84	=	756																																																																																			
[] First presentation of multiple dependent claim																																																																																											
		* Subtract the greater number of Col. 2		SUBTOTAL (2)		(\$) 774																																																																																					
		** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3																																																																																									

RECEIVED
DEC 6 2001
TECHNOLOGICAL CENTER R3700

SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	Albert C. Smith	Reg. Number	20,355
Signature	<i>A. C. Smith</i>	Date	11/26/02

[†] Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby